Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

Open to Public Inspection

For the 2010 calendar year, or tax year beginning 7/1/2010 and ending 6/30/2011 D Employer identification number C Name of organization Check if applicable Virginia Scholastic Rowing Association Doing Business As Address change 52-1217491 E Telephone number Name change Number and street (or P O box if mail is not delivered to street address) Initial return P.O. Box 23042 703 495-9027 City or town, state or country, and ZIP + 4 Terminated 22304 G Gross receipts \$ Amended return Alexandria VA 294.131 Name and address of principal officer: Application pending H(a) is this a group return for affiliates? Michael K. Mutter 6229 N 23rd St, Arlington, VA 22205 H(b) Are all affiliates included? If "No," attach a list (see instructions) X 501(c)(3)) < (insert no) 4947(a)(1) or 527 Tax-exempt status 501(c) Website: ► www.vasra.org H(c) Group exemption number X Corporation Trust Other > K Form of organization Association L Year of formation 1982 M State of legal domicile VA Part I Summarv Briefly describe the organization's mission or most significant activities: Conduct scholastic competitive rowing regattas mid-March through mid-May each year for 35 member and 10 high schools. Sponsor the Virginia Scholastic Rowing Championships each year. Sponsor safety, referee, and coxswain training clinics, Maintain a USRowing Class 'A' 2000 meter race course. Check this box | If the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 41 5 0 Total number of individuals employed in calendar year 2010 (Part V, line 2a) 6 1.500 Total unrelated business revenue from Part VIII, column (C), line 12. 0 0 Net unrelated business taxable income from Form 990-T, line 34. **Current Year** Contributions and grants (Part VIII, line 1h) 53.472 Program service revenue (Part VIII, line 2g) 119,776 9 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 16 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 88.639 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12). 12 261,903 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10). 0 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 b Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 169.430 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) . . . 169,430 19 Revenue less expenses. Subtract line 18 from line 12. 92,473 Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 150,215 198,856 21 Total liabilities (Part X, line 26) . . . 4,385 22 Net assets or fund balances. Subtract line 21 from line 20 194,471 Signature Block Part II Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signature of officer Date Here Mark R. Peterson Treasurer Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Paid Check self-employed SELF-PREPARED RETURN Preparer's Firm's name Firm's EIN **Use Only** Firm's address Phone no

Form 990 (2010)

Yes

May the IRS discuss this return with the preparer shown above? (see instructions)

Form 9	90 (2010)	Virginia Scholastic Rowing Association	52-1217491	Page 2
Pa	rt III	Statement of Program Service Accomplishments		,
		Check if Schedule O contains a response to any question in this Part III		' X
1		describe the organization's mission:	,	,
	The VA	SRA mission is to promote, encourage and support rowing at secondary schools in the		
		ation amongst its member teams, Local organizing Committees, the Crew Council (governing		
2		nd the Coaches Committee; and to sponsor and conduct scholastic rowing competitions. organization undertake any significant program services during the year which were not listed on		
2		r Form 990 or 990-EZ?		x No
		describe these new services on Schedule O.	L Yes	S [V] NO
3	-	organization cease conducting, or make significant changes in how it conducts, any program		
•	services	s?	Tyes	X No
		' describe these changes on Schedule O.	[] 168	, [V] 140
4		e the exempt purpose achievements for each of the organization's three largest program services	by expenses	
		501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the am		and
		ons to others, the total expenses, and revenue, if any, for each program service reported.	J	
4a	(Code:) (Expenses \$ 99,161 including grants of \$ 0) (Revenue	e\$ 11	19,776)
	Conduc	ted ten scholastic competitive rowing regattas from March 26 to May 21, 2011 for 35 member		
		guest high schools, 850 to 1500 athletes each regatta. Regatta duration varies from 4 to 10		
	hours. S	Sponsor the annual Virginia Scholastic Rowing Championships (state championships).		
		•••••		
		••••••		
		•••••••••••••••••••••••••••••••••••••••		
4b	(Code:) (Expenses \$ 40,135 including grants of \$ 0) (Revenue	e \$	0)
		n a 2000 meter, 6-lane, Class 'A' rowing race course valued at \$60,000.		
		•••••••••••••••••••••••••••••••••••••••		
4c	(Code:) (Expenses \$ 5,242 including grants of \$ 0) (Revenue	e \$	0)
	•	100 Volunteer Coordinator Handbooks to assist regatta management and member booster		
		ations to satisfy the requirement for 1500 volunteer assignments. Publish 50 Representative		
		oks detailing the VASRA structure, Bylaws, Operations Manual, policies, rowing rules and		
	more.			
			/	
<i>.</i> •				
∕4d		rogram services. (Describe in Schedule O.)		
	(Expens		0)	
Aa	Total n	rogram service expenses 147 302		

Checklist of Required Schedules Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions) 2 Х Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to Х 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) Х Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues. assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, 5 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes." 8 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," 10 Did the organization, directly or through a related organization, hold assets in term, permanent, or Х If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, Х a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete 11a b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more 11b c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more 11c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 110 f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X. . . . 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," 12b and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional . 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E....... 13 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions). 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20a b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some

Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions) .

Par	t IV Checklist of Required Schedules (continued)	7791		age 🕶
	Chiconnet of Atoquired Contained	"	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	,		, X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the	21		-
22	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	- 22		
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
•	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		-
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	270	-	
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	250		
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	230		_^
20	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26	. 1	Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	20		
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?	l i		
	If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L.	21		^
20	Part IV instructions for applicable filing thresholds, conditions, and exceptions):		,	
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete</i>	20a		^
•	Schedule L, Part IV	28b		Х
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29		- <u>^</u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	120		
•	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	30		
•	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?	· ·		
	If "Yes," complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	1	Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
а	Did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,		1	
	Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36	ļ	Χ
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			-i`
	19? Note. All Form 990 filers are required to complete Schedule O	38	x	
		, ,,,,		

Form 9	90 (2010) Virginia Scholastic Rowing Association 52-121	7491	P	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V		•	<u> </u>
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1	[1
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1	i	i
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	-	1	İ
	gaming (gambling) winnings to prize winners?	1c	<u> </u>	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		ì	1
	Statements, filed for the calendar year ending with or within the year covered by this return.		l	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<u> </u>	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	 	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	1	1	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	۱	ł	
	account)?	4a		X
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	1	ļ	ĺ
£-		5a	ŀ	X
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5b	 	x
b	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		 ^
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	50		-
va	organization solicit any contributions that were not tax deductible?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	-		 ``
-	gifts were not tax deductible?	6b	,]
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	l	ļ	ļ
	and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	1		
	required to file Form 8282?	7c	<u> </u>	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	1	1	ĺ
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	ļ	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<u>7g</u>		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	7h	ļ	├
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	ĺ		Ì
	organization, have excess business holdings at any time during the year?	8	ł	Ì
9	Sponsoring organizations maintaining donor advised funds.	 - °	 	1-
a	Did the organization make any taxable distributions under section 4966?	9a		ł
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	 	†
10	Section 501(c)(7) organizations. Enter:	1		
а	Initiation fees and capital contributions included on Part VIII, line 12	1		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		
11	Section 501(c)(12) organizations. Enter:	1	1	
а	Gross income from members or shareholders			1
b	Gross income from other sources (Do not net amounts due or paid to other sources	}	1	İ
	against amounts due or received from them.)]		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u>L</u> _
þ	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u></u>		<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	1	
_	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which]	1
_	the organization is licensed to issue qualified health plans	4	1	1
•	The one annual of reserves on page	1		

14a

14b

Part VI Governance, Manager

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sect	ion A. Governing Body and Management								
			Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 41								
ь	Enter the number of voting members included in line 1a, above, who are independent 1b 41	1 1							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1		ŀ					
_	any other officer, director, trustee, or key employee?	2		х					
3	Did the organization delegate control over management duties customarily performed by or under the direct	-		-^-					
3	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		х					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	X	ļ					
6	Does the organization have members or stockholders?	6	X						
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			ŀ					
	of the governing body?	7a		X					
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Х					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during								
	the year by the following.			ŀ					
а	The governing body?	8a	X	ŀ					
b	Each committee with authority to act on behalf of the governing body?	8b	X						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached								
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		х					
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue Co								
	ten 2.1 Chiefe (11th Coulon 2 requeste information about policies not required by the internal revenue Co	,,,,	Yes	No					
10a	Does the organization have local chapters, branches, or affiliates?	10a	103	X					
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	IVa		 ^-					
b		امدا							
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b							
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the								
	form?	11a	<u> X</u>						
b	· · · · · · · · · · · · · · · · · · ·								
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		Х					
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give								
	rise to conflicts?	12b							
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"								
	describe in Schedule O how this is done	12c							
13	Does the organization have a written whistleblower policy?	13		Х					
14	Does the organization have a written document retention and destruction policy?	14		Х					
15	Did the process for determining compensation of the following persons include a review and approval by								
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
•		450		v					
a	The organization's CEO, Executive Director, or top management official	15a		X					
b		15b							
40-	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)								
168	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			١					
	with a taxable entity during the year?	16a		<u> </u>					
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate								
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard								
	the organization's exempt status with respect to such arrangements?	16b		l					
Sect	ion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ► None								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s or	ly)							
	available for public inspection. Indicate how you make these available. Check all that apply.								
	Own website Another's website X Upon request								
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest	it							
	policy, and financial statements available to the public.	-							
20	State the name, physical address, and telephone number of the person who possesses the books and records of the								
	The second section is a second								
	organization. ► Mark R. Peterson 703 495-902 8307 Tabor Lane, Fairfax Station, VA 22039	·	-						
	6307 Fabul Lane, Famax Station, VA 22039								

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om 990 (2010)	`Virginia	Scholastic	Rowing	Associatio
OHII 000 (2010)	viigiiiia	CONTRACTOR	110111111111111111111111111111111111111	ASSOCIATIO

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated
Employees, and Independent Contractors
Check if Schedule O contains a response to any question in this Part VII

Section A.	Officers,	Directors,	Trustees, Ke	y Employe	es, and Highes	t Compensated	Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations
 List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average	(C) Position (check all that apply)						(D) Reportable	(E) Reportable	(F) Estimated
	hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) Robert C. Ittig President	5.	х		x				0	0	0
(2) Michael K. Mutter Vice President	10.	х		Х				0	0	0
(3) John D White II Secretary	25.	x		х				0	0	0
(4) Mark R Peterson Treasurer	20	х		х				0	0	0
(5) Ryz Obuchowicz At-Large	10.	х	_					0	0	0
(6) Fran Phoenix At-Large	5.	х			_			0	0	0
(7) Harry Heim At-Large	5.	х			_			0	0	0
(8) Richard & Marla Schafer Briar Woods HS	1.	х	_					0	0	0
(9) Ben Thompson Christchurch HS	1.	х			_			0	0	0
(10) Mark Gowan Episcopal HS	1.	х	ļ					0	. 0	0
(11) Pam Jones Fairfax HS	1.	х		_				0	0	0
(12) Curtis Hoagland Forest Park HS	1.	х						0	0	0
(13) Don Schilpp Gar-Field HS	1.	x						0	0	. 0
(14) Charles MacNamara Georgetown Visitation HS	1.	x		_	_		_	0	0	0
(15) Jon Hatch Gloucester HS	1.	X						0	0	0
(16) Dorothy Lazor Hylton HS	1.	×				<u> </u>		0	0	0 Earn 990 (2018)

Part VII Section A. Officers, Directors, Ti	rustees, Key Er	nplo	yee	s, a	nd	High	est	Compensated	Employees (co	ntinu	ed)	
(A)	(B) (C) Average Position (check all that app							(D)	(E)	1	(F)	
Name and title	Average hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director		Officer		Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	cor on ar	stimated mount of other inpensated from the ganizated ind related ganizated	of tion e on ed
(17) Jenny Kusmik J E B Stuart HS	1.	х						0	O			0
(18) Ronald Marx	4	J										
James Madison HS (19) Cynthia Maltenfort	1,	X		-				0	0			0
Lake Braddock HS	1.	Х						0	0			0
(20) Nathalie & Jun Quion Langley HS	1.	x						0	o			0
(21) Paul White												<u>_</u>
Mathews HS (22) Douglas hale	1.	X	-	-				0	0			0
(22) Douglas hale McLean HS	1	х						0	o			0
(23) Lisa Schneider Mt Vernon HS	1	x										^
(24) Mark LaViolette	1.	 ^-						0	0			0
National Cathedral/St Albans HS	1.	X	_					0	0			0
(25) Mike Mulreany Oakton HS	1.	x						0	0			0
(26) Bill Wonderte		,,						_	_			
Potomac HS (27) Thomas Criman	1.	X						0	0	_		0
Robinson HS	1.	х						0	0			0
(28) Elizabeth Britton Sidwell Friends HS	1.	x						0				0
1b Sub-total				<u>. </u>				0				0
c Total from continuation sheets to Part VII,								0	 			0
d Total (add lines 1b and 1c)	imited to those						ceiv	ed more than \$	0 100.000 in	<u> </u>		0
reportable compensation from the organizatio				0							,	
3 Did the organization list any former officer, di	rector or trustee	kev	em	nlo	/	or h	iaha	est companeate	d	r	Yes	No
employee on line 1a? If "Yes," complete Sche					yee,					3	_ ===	Х
4 For any individual listed on line 1a, is the sum	•							•				
the organization and related organizations gre individual	eater than \$150,	000?	' <i>It "</i>	Yes	s, " C	ompl 	ete	Schedule J for	such	4		Х
5 Did any person listed on line 1a receive or acc	crue compensat	ion fr	om	any	un	relate	ed c	organization or in	ndividual	<u> </u>		
for services rendered to the organization? If "	Yes," complete	Sche	dule	9 J 1	or s	uch j	oers	son	<u></u>	5		Х
Section B. Independent Contractors 1 Complete this table for your five highest comp	ensated indens	nden	t co	ntra	acto	rs th:	at re	eceived more th	an \$100 000 of			
compensation from the organization.												
(A) Name and business add	ress							(B) Description of ser	vices	(C Compe) nsation	
None												0
							<u> </u>					0
	 						<u> </u>	······································				<u>0</u> 0
												0
2 Total number of independent contractors (incl more than \$100,000 in compensation from the	_	nited •	to t	hos	e lis	ted a		ve) who receive	d			

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Part VIII Statement of Revenue (D) (A) (B) (C) Total revenue Related or Unrelated Revenue excluded from exempt husiness function revenue tax under sections revenue 512, 513, or 514 1a Contributions, gifts, grants and other similar amounts 1b 52.244 1c 0 1d 0 Government grants (contributions) . . . 1e All other contributions, gifts, grants, and similar amounts not included above. 1f 1,228 Noncash contributions included in lines 1a-1f: Total. Add lines 1a-1f 53,472 **Business Code** Program Service Revenue 713990 44,749 44,749 2a Entry Fees 61.823 61,823 b Parking 812930 485000 13,204 13,204 Busses / Shuttle Van f All other program service revenue 119,776 Total. Add lines 2a-2f Investment income (including dividends, interest, and 3 other similar amounts) 4 Income from investment of tax-exempt bond proceeds 0 5 Royalties (II) Personal 6a Gross Rents b Less: rental expenses . . . c Rental income or (loss) . . . d Net rental income or (loss). . (i) Securities (ii) Other 7a Gross amount from sales of assets other than inventory. b Less: cost or other basis and sales expenses c Gain or (loss) 0 Other Revenue 8a Gross income from fundraising events (not including \$ _____0 of contributions reported on line 1c). b Less: direct expenses b c Net income or (loss) from fundraising events . 9a Gross income from gaming activities. See Part IV. line 19. b Less: direct expenses b c Net income or (loss) from gaming activities . 10a Gross sales of inventory, less returns and allowances 65.459 **b** Less: cost of goods sold 32.228 Net income or (loss) from sales of inventory. 33,231 33,231 Miscellaneous Revenue **Business Code** 11a Embezzlement partial restitution 900099 51,934 51,934 **b** Vendor Fees 453220 1,874 1,874 c Volunteer No-Show Fines 900099 1,250 1.250 All other revenue 350 350 55,408 Total revenue. See instructions. . . . 261,903 156,131 52,300

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). Do not include amounts reported on lines 6b. (A) (D) (B) Total expenses Fundraising Program service Management and 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 2 Grants and other assistance to individuals in the U.S. See Part IV. line 22 0 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members 0 Compensation of current officers, directors, trustees, and key employees 0 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 0 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 0 9 Other employee benefits 0 0 10 Fees for services (non-employees): а 0 b 0 C 0 d Professional fundraising services. See Part IV, line 17. . . . 0 f 0 34,551 32,921 1,630 g 12 0 13 Office expenses 7,980 5.242 2,738 Information technology 9,198 14 8,550 648 15 0 36,217 16 36,217 521 17 521 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0 19 0 Conferences, conventions, and meetings..... 20 0 21 550 550 Depreciation, depletion, and amortization 22 0 0 23 10.540 4,750 5,790 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.) Equipment Purchases 44,477 40,135 4.342 Equipment maintenance 13,122 7,555 5,567 6.871 Trophies, plaques, medals and ribbons 6,871 Training 2,764 2.764 d e Administration 1,454 562 892 f All other expenses 1,185 1,185 Total functional expenses. Add lines 1 through 24f. 169,430 147,302 25 22,128 0 Joint costs. Check here ▶ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Part X	Balance Sheet	(4)		(B)
•	·	(A) Beginning of year		End of year
1	Cash—non-interest-bearing		1	
2	Savings and temporary cash investments			67,474
3	Pledges and grants receivable, net		3	0
4	Accounts receivable, net		4	16,988
5	Receivables from current and former officers, directors, trustees, key		1	
	employees, and highest compensated employees. Complete Part II of	f	1 1	
	Schedule L		5	
6	Receivables from other disqualified persons (as defined under section	1	{	
	4958(f)(1)), persons described in section 4958(c)(3)(B), and contribute	I .	i i	•
1	employers and sponsoring organizations of section 501(c)(9) volunta	•	1 1	
B	employees' beneficiary organizations (see instructions)		6	
Assets 7	Notes and loans receivable, net	, - ·	 	0
8 &	Inventories for sale or use	· · · · · · · · · · · · · · · · · · ·	8	
9	Prepaid expenses and deferred charges		9	·
10a		•	1	
100		6,764		
	· · · · · · · · · · · · · · · · · · ·	2,370 116,056	10c	114,394
11	Investments—publicly traded securities			0
12	Investments—other securities. See Part IV, line 11			0
13	Investments—program-related. See Part IV, line 11		13	0
14	Intangible assets		14	0
15	Other assets. See Part IV, line 11.		15	. 0
16			+	198,856
17	Total assets. Add lines 1 through 15 (must equal line 34)		17	4,385
18	Grants payable		18	4,000
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	······································
	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities 22	Payables to current and former officers, directors, trustees, key	· · 	-21	
5 2	employees, highest compensated employees, and disqualified	1	1 1	
9	persons. Complete Part II of Schedule L	j	22	
23	Secured mortgages and notes payable to unrelated third parties			
24	Unsecured notes and loans payable to unrelated third parties			0
25	Other lightities Complete Bort V of Cabadata B			0
26	Total liabilities, Add lines 47 through 35			0
		·	26	4,385
တ္တ	Organizations that follow SFAS 117, check here X and		1 1	
2	complete lines 27 through 29, and lines 33 and 34.	Į.	1 1	
<u>e</u> 27	Unrestricted net assets	150,215	27	172,403
m 28	Temporarily restricted net assets		28	22,068
일 29	Permanently restricted net assets	· ·	29	
Net Assets or Fund Balances 2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	Organizations that do not follow SFAS 117, check here ▶			
0	and complete lines 30 through 34.	1)	
형 30	Capital stock or trust principal, or current funds		30	
% 31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds		32	
ž 33	Total net assets or fund balances	150,215		194,471
34	Total liabilities and net assets/fund balances	150,215		198,856

om 9	90 (2010) Virginia Scholastic Rowing Association	<u>52-1217491 </u>	Page	e 12
Part	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response to any question in this Part XI		<u>. [</u>]	<u>X</u> _
		,		
1	Total revenue (must equal Part VIII, column (A), line 12)	 	261,	
2	Total expenses (must equal Part IX, column (A), line 25)		169,	<u>430</u>
3	Revenue less expenses. Subtract line 2 from line 1	<u> </u>		<u>473</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		150,	<u>,215</u>
5	Other changes in net assets or fund balances (explain in Schedule O)	•	-48,	217
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,			
	column (B))	<u> </u>	194,	<u>471</u>
Part			_	_
	Check if Schedule O contains a response to any question in this Part XII		<u>. L</u>	
	<u></u>		Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.		- 1	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	. 2a	X	
b	Were the organization's financial statements audited by an independent accountant?	. 2b		X
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were		- 1	
	issued on a separate basis, consolidated basis, or both:		- 1	
	X Separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a	- 1	Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3ь		
		Form !	990/2	2040)

•

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

►See separate instructions.

Inspection

Name of the organization **Employer identification number** Virginia Scholastic Rowing Association 52-1217491

► Attach to Form 990 or Form 990-EZ.

Рa	rt I	Reason	for Public Ch	arity Status (All org	anization	ns must c	complete	this part	.) See in	struction	ns.							
he	orgar		-	ation because it is: (Fo		_												
1		A church, co	nvention of chu	rches, or association of	of churche	es describ	ed in sec	tion 170(b)(1)(A)(i).								
2		A school des	scribed in sectio	on 170(b)(1)(A)(ii). (At	tach Sche	edule E.)												
3		A hospital or	a cooperative h	nospital service organi	zation de	scribed in	section '	170(b)(1)	(A)(iii).									
4			-	ation operated in conju	inction wi	th a hospi	tal descri	bed in se	ction 170	(b)(1)(A)	(iii). En	ter the	!					
_	_	=	me, city, and sta															
5		_	•	the benefit of a collect (Complete Part II.)	ge or univ	ersity owr	ned or ope	erated by	a governi	mental ui	nit desc	ribed						
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).																
7	An organization that normally receives a substantial part of its support from a governmental unit or from the governmental uni										e genei	al pub	lic					
8		A community	trust described	l in section 170(b)(1)	(A)(vi) . (C	omplete F	Part II.)											
9	X	An organizat receipts from support from	tion that normall n activities relate gross investme	y receives: (1) more the detection to its exempt function to its exempt function to its exempt function after June 30, 1975.	nan 33 1/3 ons—subj ted busind	3% of its s ject to cer ess taxabl	support fro tain exce _l le income	otions, an (less sec	d (2) no ration 511 i	nore thar	33 1/3	% of its	•					
10		An organizat	lion organized a	nd operated exclusive	ly to test	for public	safety. Se	ee sectio	n 509(a)(4).								
11	\sqcap	An organizat	tion organized a	nd operated exclusive	ly for the	benefit of	to perfor	m the fun	ctions of,	or to car	ry out ti	пе						
		purposes of	one or more pul	blicly supported organ at describes the type o	izations d	lescribed	in section	509(a)(1) or section	on 509(a)	(2). See		on					
		a 🔲 Type	1 b	Type II c	Тур с	III-Fund	tionally in	tegrated		d 🔲 1	ype III	-Other	r					
e		persons other		y that the organization on managers and othe			-	-	-				ion					
f				- <i></i> a written determinatio	n from the	IRS that	it is a Tvr	e I Tyne	II or Tyn	e III sunr	orting							
g		organization	, check this box st 17, 2006, has															
		• •		or indirectly controls,	either alo	ne or toge	ether with	persons (described	ın (ii)		Yes	No					
			-	verning body of the su		-		•			11g(i)							
				person described in (i							11g(ii)							
				y of a person describe							11g(iii)	L						
_ <u>h</u>				ation about the suppor	T													
(I		e of supported anization	(ii) EiN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	in col (i) li	organization sted in your document?	the organ	ou notify nization in of your oort?	organizat (i) organi	Is the tion in col zed in the S ?) Amoun support	t of					
			Ì	(acc mod dedame),	Yes	No	Yes	No	Yes	No	1							
A)																		
B)					ļ		<u> </u>	<u> </u>	ļ		 		0					
										<u> </u>	ļ		0					
C)													0					
D)											1							
E)		· <u>·····</u>									 	-	0					
		·····				-				 	 		0					
			•	1		1					1							

	m 990 or 990-EZ) 2010 Virginia Scholastic Rowing Association	52-1217491 Page 4
Part IV	Supplemental Information. Complete this part to provide the explanations require Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any addition instructions).	
Part III Line I	Line 12: \$51,934 is a partial restitution payment from the husband of the	
former Assoc	ciation Treasurer who embezzled Association money.	·
	•••••••••••••••••••••••••••••••••••••••	
• • • • • • • • • • • • • • • • • • • •		
	•••••••••••••••••••••••••••••••••••••••	
	•••••••••••••••••••••••••••••••••••••••	

52-1217491

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees					ļ	
	received. (Do not include any "unusual grants ")	4,850	44,386	2,622	6,398	53,472	111,728
2	Gross receipts from admissions, merchandise	l		Ţ			
	sold or services performed, or facilities furnished						
	in any activity that is related to the	ł					
	organization's tax-exempt purpose	113,941	136,686	134,226	173,178	188,709	746,740
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513.						0
4	Tax revenues levied for the organization's						
	benefit and either paid to or expended on		ļ		ŀ		
	its behalf						0
5	The value of services or facilities						
	furnished by a governmental unit to the		ļ	į		ļ	
	organization without charge						0
6	Total. Add lines 1 through 5	118,791	181,072	136,848	179,576	242,181	858,468
7a	Amounts included on lines 1, 2, and 3		ļ				
	received from disqualified persons .						0
b	Amounts included on lines 2 and 3 received		i				
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the		l				
	amount on line 13 for the year		·······				0
C	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from						
	line 6)	I					858,468
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6	118,791	181,072	136,848	179,576	242,181	858,468
10a	Gross income from interest, dividends,						
	payments received on securities loans,					,	
	rents, royalties and income from sımılar sources	66	31	11	6	16	130
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						0
C	Add lines 10a and 10b	66	31	11	6	16	130
11	Net income from unrelated business	•		1			
	activities not included in line 10b, whether						
	or not the business is regularly carried on .						0
12	Other income. Do not include gain or						
	loss from the sale of capital assets			1			
	(Explain in Part IV.)					51,934	51,934
13	Total support. (Add lines 9, 10c, 11,	440.057	404 400	100.050	470 500	004 404	040 500
	and 12.)	118,857	181,103		179,582		910,532
14	First five years. If the Form 990 is for the organization, check this box and stop here	ation's ilist, secor	ia, thira, tourth, c			c)(3)	
0	-	Dansantana	• •		 		
	tion C. Computation of Public Support		. 40(5)			45	04.000/
15	Public support percentage for 2010 (line 8, column	· · ·				15	94.28%
16 Soc	Public support percentage from 2009 Schedule A, tion D. Computation of Investment Inco		······			16	99.96%
	Investment income percentage for 2010 (line 10c,			·mn (6)		47	0.019/
17 18	Investment income percentage for 2010 (line 10c, a linestment income percentage from 2009 Schedul		-	ımn (t))	• •	17	0.01% 0.03%
16 19a	33 1/3% support tests-2010. If the organization d			and line 15 is mor			0.03%
ızd	not more than 33 1/3%, check this box and stop h		-				▶ [X]
ь	33 1/3% support tests-2009. If the organization d	_			-		· · · - [Δ]
S	line 18 is not more than 33 1/3%, check this box as						
20	Private foundation If the organization did not che		-			-	

instructions.

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2006 (b) 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 0 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 0 3 The value of services or facilities furnished by a governmental unit to the organization without charge 0 Total. Add lines 1 through 3 . . . 0 0 0 0 0 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4. 0 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2006 (c) 2008 (b) 2007 (d) 2009 (e) 2010 (f) Total 7 Amounts from line 4 0 0 0 0 0 0 Gross income from interest, dividends, 8 payments received on securities loans, rents, royalties and income from similar 0 9 Net income from unrelated business activities, whether or not the business is regularly carried on 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 0 11 Total support. Add lines 7 through 10. 0 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 0.00% 15 Public support percentage from 2009 Schedule A, Part II, line 14 15 0.00% 16a 33 1/3% support test-2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box 33 1/3% support test-2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this 10%-facts-and-circumstances test-2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test-2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18

Continuation Sheet for Form 990

Page 1 of 1

Name of the Organization
Virginia Scholastic Rowing Association

Employer identification number

52-1217491

Part VII Section A Contin

Continuation of Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees										
(A)	(B) (C) Average Position (check all that apply)					(D)	(E)	(F)		
Name and title	Average hours per week (describe hours for	Individual trustee or director	,	Officer		Highest compensated employee		Reportable compensation from the organization	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the
	related organizations in Schedule O)	ustee	trustee		8	npensated		(W-2/1099-MISC)		organization and related organizations
(29) Adale Tourtellott	1.	х						0	0	
South County HS (30) Courtney Baldridge		 ^	1-		╁	╁				0
St Stephens/Ste Agnes HS	1.	X	1		1	}		o	o	0
(31) Eric Schilling										
TCWilliams HS	1.	X	_	<u> </u>	L	<u> </u>		0	0	0
(32) Dave Applin)				
Thomas Jefferson HS	1.	X	├	-	├	├	-	0	0	0
(33) Mark Ramage WT Woodson HS	1.	X		_	_			0	0	0
(34) Merlisa Corbett Wakefield HS	1.	Х						0	0	0
(35) Tim Aiken			ļ							_
Washington-Lee HS	1.	X	}—		<u> </u>	 -	<u> </u>	0	0	0
(36) Mick McKeown West Potomac HS	1.	х	<u> </u>		_			0	0	0
(37) Grant Bridgewater West Springfield HS	1.	X						0	0	0
(38) Myriam Pitts										
Western Albemarle HS (39) Shirley von Rinteln	1	X	-	├	-	 	╁	0	0	0
Westfield HS	1.	X		l	l	1	1	۰ ا	o	0
(40) Hal johnson				Г						
Woodbridge HS	1	<u>X</u>	<u> </u>	<u> </u>	Ļ.	<u> </u>	<u> </u>	0	0	0
(41) Michael Osborne							ļ			_
Yorktown HS (42)	1	<u> </u>	╁	\vdash	\vdash	 	_	0	0	0
(43)			_	-	┞	-				
(44)			-	-	-	-	-			···
				_	<u> </u>	<u> </u>	_			
(45)						<u> </u>				
(46)										
(47)										
(48)										
(49)			 	1	T		T			
	ــــــــــــــــــــــــــــــــــــــ	Щ.	1	Ц_			1	L		<u> </u>

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990,

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Part iV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990.

► See separate instructions.

Inspection

iailie (of the organization	Employer identification number
/irain	ia Scholastic Rowing Association	52-1217491
Part		ds or Accounts. Complete if
	the organization answered "Yes" to Form 990, Part IV, line 6.	·
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
	· · · · · · · · · · · · · · · · · · ·	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year) .	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in	
	funds are the organization's property, subject to the organization's exclusive legal control	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant f	
	used only for charitable purposes and not for the benefit of the donor or donor advisor, or	
	purpose conferring impermissible private benefit?	Yes No
Part	Conservation Easements. Complete if the organization answered "Yes" to	Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
•		an historically important land area
		an historically important land area
	Protection of natural habitat Preservation of	a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution	n in the form of a conservation
	easement on the last day of the tax year.	
	, ,	Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
C	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a	
	historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or term	ninated by the organization
	during the tax year	, ,
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection,	handling of
	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation of	
	•	,
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation ease	ments during the year
	▶ \$	•
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of	of section
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	Yes No
9	In Part XIV, describe how the organization reports conservation easements in its revenue	and expense statement, and
	balance sheet, and include, if applicable, the text of the footnote to the organization's final	
	the organization's accounting for conservation easements	
Par	Organizations Maintaining Collections of Art, Historical Treasures, or Other S	Similar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	
12	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its re	evenue statement and halance sheet
	works of art, historical treasures, or other similar assets held for public exhibition, educati	
	of public service, provide, in Part XIV, the text of the footnote to its financial statements the	
b		
U	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its rever	
	works of art, historical treasures, or other similar assets held for public exhibition, educati	on, or research in luttherance
	of public service, provide the following amounts relating to these items:	~ ¢
	(i) Revenues included in Form 990, Part VIII, line 1	
_	(ii) Assets included in Form 990, Part X	eta far financial asia provide the
2	If the organization received or held works of art, historical treasures, or other similar asset	
_	following amounts required to be reported under SFAS 116 (ASC 958) relating to these if Revenues included in Form 990, Part VIII, line 1	iems.
a	Revenues included in Form 990, Part VIII, line 1	5
b	Assets included in Form 990, Part X	• \$

Part VII Investments—Other Securities	See Form 990, Part X,	line 12.	
(a) Description of secunty or category (including name of secunty)	(b) Book value	(c) Method of valuation. Cost or end-of-year market value	
(1) Financial derivatives	0		
(2) Closely-held equity interests	0		
(3) Other	0		
(A)	0		
(B)	0		
(C)	0		
(<u>D</u>)	0		
(E)	0		
(F)	0	<u> </u>	
(G)	0		
(H)	0	 	
(i) Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	0	· · · · · · · · · · · · · · · · · · ·	
Part VIII Investments—Program Related		<u></u>	
		(c) Method of valuation	
(a) Description of investment type	(b) Book value	Cost or end-of-year market value	
(1)	0		~
(2)	0		
(3)	0		
(4)	0		
(5)	0		
(6)	0		
	0		
(8)	0	 	
(9)	0		
(10) Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	0		
Part IX Other Assets. See Form 990, Part IX		 	
	Description	(b) Book value	
(1)			0
(2)			0
(3)			0
(4)			0
(5)		·	0
(6)			0
	·····		0
(8)			0
<u>(9)</u> (10)	······································		0
Total. (Column (b) must equal Form 990, Part X, co	(R) line 15)		-
Part X Other Liabilities. See Form 990			<u> </u>
1. (a) Description of liability	(b) Amount		
(1) Federal income taxes	0	5	
(2)	0	<u> </u>	
(3)	0		
(4)	0		
(5)	0		
(6)	0	4	
(7)	0	1	
(8)	0	4	
(9)	0	4	
(10) (11)	0	7	
Total, (Column (b) must equal Form 990, Part X col. (B) line 25.)		3	

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's financial statements that reports the organization's financial statements that reports the organization's financial statements that reports the organization's financial statements that reports the organization's financial statements that reports the organization's financial statements that reports the organization's financial statements that reports the organization's financial statements that reports the organization's financial statements that reports the organization's financial statements that reports the organization's financial statements that reports the organization's financial statements that reports the organization's financial statements that reports the organization's financial statements that reports the organization's financial statements that reports the organization's financial statements that reports the organization's financial statements that reports the organization organiza

Sched	ule D (Form 990) 2010		Page 4
Par	Reconciliation of Change in Net Assets from Form 990 to Audited Financial	Statements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	, 261, 903
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	169,430
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	92,473
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	0
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	92,473
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue	per Return	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIV.)		
6	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	0
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	- }	
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
þ	Other (Describe in Part XIV.)		
C	Add lines 4a and 4b	. 4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	0
Pai	t XIII Reconciliation of Expenses per Audited Financial Statements With Expense	s per Return	
1	Total expenses and losses per audited financial statements	1	· · · · · · · · · · · · · · · · · · ·
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities		
þ	Prior year adjustments		
¢	Other losses		
þ	Other (Describe in Part XIV.)		
ę	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	0
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
p	Other (Describe in Part XIV.)		
C	Add lines 4a and 4b	. 4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	0
Pa	t XIV Supplemental Information		·
and	aplete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4 part to provide any additional information	b. Also comple	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Employer identification number

Virginia Scholastic Rowing Association	52-1217491
Form 990, Part III, Line 4d: Program Service Expenses: 2,764, Grants and allocations: 0.	
Revenue: 0 Sponsored two clinics for training and recruiting USRowing referees, attendance	
167. Sponsored a coxswain training clinic, attendance 141.	
Form 990, Part III, Line 4d: Program Service Expenses; 0, Grants and allocations: 0, Revenue:	
0 Coordinate with the Northern Virginia Reginal Park Authority, US Park Service, and D.C.	
Government to promote responsible parks use, water safety, and athletic interaction. Provided	
several members on the Scholastic Rowing Association of America Board of Trustees, including	g
its Vice President. Provided a representative on the USRowing Safety committee. Supported a	nd
advised the VASRA governing body, the Virginia Crew Council, that is made up of the member	
school Athletic Directors.	
Form 990 Part VI Section A, Line 5: Governing Body and Management: It was discovered on	
October 4, 2010 the Association Treasurer had been embezzling Association funds (for at least	<u> </u>
five years). The total that can be substantiated is between \$152,000 and \$223,000. \$59,156.99	1
of losses are recognized in this FY2011 tax year: \$31,848.82 was reported by the Association	
Treasurer to be in the Association Building Fund at the end of last fiscal year, but did not	•••••
exist; \$14,705.67 was spent on non-Association, personal, expenditures this fiscal year; and	
\$12,602.50 is simply missing this fiscal year. Additionally, vendor invoices totaling	
\$40,684.80 that were reported paid in 2009 and 2010 fiscal years were, in fact, not paid. A	
partial restitution payment of \$51,934 36 was received on October 19, 2010, most of which wer	nt .
to satisfying these outstanding obligations. This partial restitution is accounted for on this	
Form 990	
Form 990 Part VI Section A, Line 6: Governing Body and Management: The Association members	pers are
the 34 crew booster organizations (one each scholastic team), the four officers, and 3	
at-large members appointed in accordance with the Association Bylaws. The booster	
organizations are governing body members and provide a representative at each Association	
meeting and approve all Association actions and decisions. The members elect the Association	n

1	
Schedule O (Form 990 or 990-EZ) (2010) Name of the organization	Page 2 Employer identification number
Virginia Scholastic Rowing Association	52-1217491
officers, none of which may be a current member of a member booster organization, i.e., have	, , , , , , , , , , , , , , , , , , ,
child currently rowing on one of the Association teams.	
(Form 990 Part VI Section B, Line 11b: Policies; Review of Form 990: The Association Treasur	er
provides the accounting books to an Association Executive Board member who prepares the F	Form
990. The completed Form 990 is discussed at an Executive Board meeting, the attendees being	ng
the four Association officers, the Past President, and three At-Large members. After the	
Executive Board review, the members are provided a copy by email and requested to commer	nt by a
specified time. It is then signed and mailed.	
Form 990 Part VI Section C, Line 19: Disclosure: The Association governing documents are	
posted on the Association web site, www.vasra.org: 1) Bylaws, 2) Operations Manual, 3)	
Association Supplement to the USRowing Rules of Rowing, 4) Safety manual, 5) Representati	ives
Handbook, 6) Volunteer Cocordinator Handbook, 7) Rowing Weight Control Program for	
lightweights, 8) Key Dates Calendar, and 9) MOU with the Northern Virginia Regional Park	
Authority, 10) Trophy, Medal, and Awards Policy. Notebooks containing these documents are	
physically available at every Association meeting. Financial statements are distributed at	•••••
every meeting and are emailed to all member booster organization Presidents, Representative	98,
and Treasurers with the meeting notice and agenda prior. Form 1023 and its approval are	
available on request. The Association has no written conflict of interest policy.	
Form 990 Part XI Line 5: Other changes in net assets or fund balances: - \$59,156.99	: <i>5</i> : -
(Embezzlement total), + \$16,987.50 (Accounts receivable change), - \$4,385.00 (Accounts pay	
change), -\$1,662.35 (Equipment basis and accumulated depreciation change) = -\$48,216.84.	
[507] Part XII Financial Statements and Reporting, Line 2c. Oversight process and selection	ion

of an independent accountant. The Association Post Office box access is now restricted to the

person first. Bank statements and QuickBooks reports are available at every Association

accountant to review the Association books (previously the Treasure obtained an accountant).

meeting so that any member may inspect them. The Executive Board now selects an independent

Secretary and Vice President to ensure all mail addressed to the Treasurer is seen by another

